

1C893 II

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	10005	10-0-0
O.I.P.E. CLASSIFIER			10/11/00
FORMALITY REVIEW	DTA	660390	11-14-00
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim		Date
Final	Original	
1	✓	1-29-03
2	✓	6-16-03
3	✓	1-5-04
4	✓	
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Claim		Date
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If more than 150 claims or 10 actions  
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